

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

JOSH HAYES, Individually and as
PERSONAL REPRESENTATIVE OF
THE ESTATE OF KIM HAYES,
deceased, JOHNNY HAYES and DONNA HAYES

Plaintiff(s)

v.

RICHARDSON ENTERPRISES, INC.,
and MICHAEL BUENROSTRO

Defendant(s)

Civil Action No. 2:20-cv-0041

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* MICHAEL BUENROSTRO
Gregg County Sheriff's Office
101 East Methvin Suite 559
Longview, Texas 76501

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Michael C. Smith
Siebman, Forrest, Burg & Smith, LLP
113 East Austin Street
Marshall, Texas 75670

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date:

2/28/2020

C. Hinton

Signature of Clerk or Deputy Clerk

Civil Action No. 2:20-cv-0041

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)*:
 Certified Mail, Return Receipt Requested
 7018 1830 0000 4585 5373
 Michael Buenrostro, Gregg County Sheriff's Office, 101 E. Methvin, Ste. 559
 Longview, TX 76501

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 3/5/2020



Server's signature

Michael E. Carr, Attorney at Law

Printed name and title

4416 S. Harvard Ave., Tulsa, OK 74135

Server's address

Additional information regarding attempted service, etc:

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Michael Buevostro
Gregg County Sheriff's Office
101 East Methuin, Ste 559
Longview, TX 75601

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7018 1830 0000 4585 5373

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SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Michael Buevostro
Gregg County Sheriff's Office
101 East Methuin, Ste. 559
Longview, TX 75601

2. Article Number (Transfer from service label)
 7018 1830 0000 4585 5373

3. Service Type
☐ Adult Signature
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
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☐ Insured Mail
☐ Priority Mail Express®
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☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

5. Date of Delivery
3-5

6. Signature
☒ Agent
☐ Addressee
Darrell Cook

7. Barcode
 9590 9402 5171 9122 6668 59

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt